



Robert E. Bush
Naval Hospital

Did you know?...

You have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

- * Through the ICE website.
- * The Hospital's Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the hospital's clinics, or directly to the Joint Commission via: E-mail at complaint@jointcommission.org Fax: 630-792-5636

The Joint Commission
Oak Renaissance Boulevard
Oakbrook Terrace, IL 60181

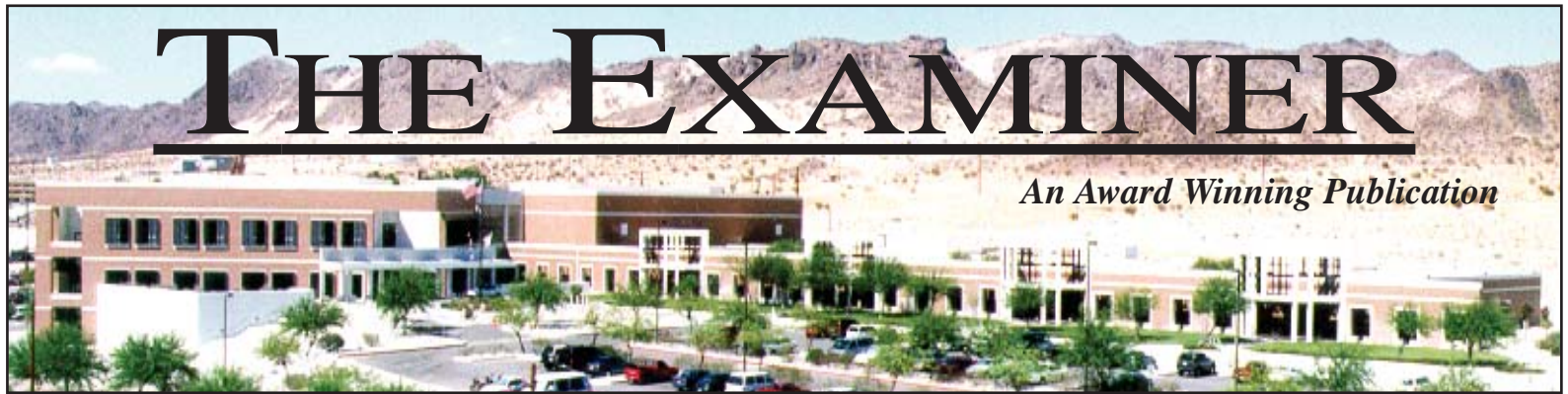
To report Fraud, Waste and Abuse contact one of the below offices by calling:

Naval Hospital: 760-830-2764
Combat Center: 760-830-7749
NavMedWest: 1-877-479-3832
Medical IG: 1-800-637-6175
DoD IG: 1-800-424-9098

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250

THE EXAMINER

An Award Winning Publication



<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>

Hospital Works to Provide Premium Care to Patients

*By Dan Barber
Public Affairs Officer
Robert E. Bush Naval Hospital*

Patients of the Robert E. Bush Naval Hospital have now been cared for in its clinics using the Medical Home Team model for more than a year now.

The patient-centered method of delivering health care has been instituted in most military medical care treatment facilities and many civilian medical prac-

tices over the past couple of years.

This hospital's model, which was begun last year, assigned primary care staff to Blue Team, Gold Team and Pediatrics, and enrolled TRICARE Prime patients to each team.

This allows patients to see the same team each time they come in for an appointment. This replaced the prior concept of having patients assigned to a single Primary Care Manager. Patients at the Naval Hospital now have an entire team of health care professionals made up of physicians, physician assistants, Certified Nurse Practitioners, Registered Nurses, Licensed Vocational Nurses and Corpsman who are dedicated to providing their assigned patients with the best possible health care management.

Specialty care by one of the hospital's network health care providers has and will remain unchanged in the near future, but, work is underway at the hospital to try to bring more specialty services "in-house" with additional staff, training or "circuit rider" specialists from San Diego or Camp Pendleton with them seeing patients here instead of making patients travel

some distance for care.

Also, the hospital disestablished the Central Appointments Call Center and also moved the clerks to Medical Home Teams last year to allow the Medical Home Team staff to speak directly to patients calling in to request appointments. In many cases with this change, patients have been able to book a same day appointment, or to speak

with a team member to receive an answer to a simple health care question. The phone number has remained unchanged, patients can still call 760-830-2752 and they will be directed to their assigned team.

Another patient pleaser the hospital has just initiated is posting the available open

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Introducing the Hospital's Senior Nurse Executive

*By Dan Barber
Public Affairs Officer
Robert E. Bush Naval Hospital*

Since this hospital opened its doors to patient care a lot of staff have come and gone. Some of the most memorable providers served in the Navy or Marine Corps with very different military jobs.

A couple of them were physicians with the Nuclear Submarine Service, one was a pilot of an A6 attack bomber and Navy test pilot, one was a weapons officer in an attack squadron, and one of our physicians served as an artillery officer in the Marine Corps and as a high school teacher before becoming a Navy Medical Corps officer.

Now we have someone with a new background Captain Sandra Mason, NC, USN former Navy tugboat crewmember, and Marine Gunnery Sergeant is our newest Senior Nurse Executive.

This multi-talented woman grew up in Forrest City Arkansas on a farm as the oldest of 11 children. "Some of my family is still there and some have moved away," Mason said. "My Family is scattered all over the United States."

According to Mason, out of all her siblings only two others joined

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Team providers are... Blue Team:

Lt. Matthew Messoline
Lt. Carrie Beaty
Lt. Lisa Gibson
Lt. Jeffrey Sorenson, and
Dr. Linda James

Gold Team:

Lt. Cmdr. Mark Woodbridge
Lt. Cmdr. Tuang Vu
Lt. Cmdr. Patricia Creller
Lt. Jannelle Mara, and
Lt. Steven Arnold

Pediatrics:

Lt. Cmdr. Timothy Brender
Lt. Cmdr. Robin Bareng
Lt. Kristina DePaolo-Carlin
Lt. Timothy Chinnock
Lt. Sarah Bialobok (deployed)

Patients seen in April -- 13,993

Appointment No Shows in April -- 793

In April we dropped a bit to 5.4 percent of patient appointment no shows. We need to keep trending downward by keeping the appointments we make, or by canceling in enough time for someone else to use the slot...

To make an appointment call -- 760-830-2752

To cancel an appointment call -- 760-830-2369



June is Men’s Health Month...Are You Still Using Tobacco?

*By Martha Hunt, MA CAMF
Health Promotions Coordinator
Robert E. Bush Naval Hospital*

Tobacco effects men’s health in many ways. In fact, tobacco use is the leading cause of death and disability in the U.S. due to heart disease, cancer, diabetes, etc.

Also, if you smoke your lung cancer risk doubles to 1 in 5 if you have a family member who has had lung cancer.

In addition to lung cancer, tobacco use can also cause other cancers and other serious illnesses.

According to the National Institutes of Health (NIH),

tobacco use has been shown to have harmful effects on all parts of the digestive system including heartburn, peptic ulcers, increased risk of Crohn’s disease, colitis, colon polyps and possibly gallstones. Tobacco also affects the liver by changing the way it breaks down medications and alcohol.

Now on to the lungs... Chronic Obstructive Pulmonary Disease (COPD) is the fourth leading cause of death in the US and the second leading cause of disability after heart disease. The NIH defines COPD as a group of lung diseases that include any combination of chronic bronchitis, emphysema, and asthma.

Tobacco use is linked to

numerous other heart and lung diseases such as: Aortic aneurysm, hardening of the arteries, damage to the arteries in the legs and feet, which can lead to amputation, heart disease, which could lead to a heart attack, high blood pressure, , Pneumonia, Stroke and Sudden death (especially in men), just to name a few.

In fact, half of all smokers will develop emphysema before they die. Those tobacco users who have a family history of stroke are six times more likely to have a stroke themselves than those individuals who do not use tobacco and do not have a family history of stroke.

Tobacco use has been linked to many other diseases besides cancer, heart and lung diseases. They can include anxiety disorders, arthritis, brain damage (especially when mixed with

alcohol use), blindness, depression, diabetes, hearing loss, osteoporosis, rotator joint injury, spinal disc damage, and can cause twice as long for broken bones to heal and six times more chance of infection in wounds.

As far as men’s reproductive health, Men who use tobacco have more infertility than non-tobacco users. They also have higher rates of impotency and erectile dysfunction. One in six men who use tobacco and 1 in 3 men who use tobacco and alcohol will develop impotency.

One in three tobacco users use it as self-medicating. What this means is that every time they get stressed, angry, depressed, lonely, etc they smoke or dip. The nicotine then self medicates that person so that they no longer have those feelings. Then when that person comes off

tobacco they ‘suddenly’ feel angry, stressed or depressed. The problems were always there, they were just using tobacco to cover up the issue. Coming off tobacco involves dealing one’s issues and resolving them.

Finally, tobacco users are nearly twice as likely to develop diabetes as are non-users... In fact, heavy users -- those who smoke more than 20 cigarettes a day or dip more than 1/4 can per day -- more than triple their risk of developing diabetes.

If you are interested in quitting tobacco, there is no longer a mandatory four week long class. All you need to do is call Health Promotion and Wellness at (760) 830-2814 for information on ways to quit tobacco.

Protecting Your Eyes in the Desert

*By Martha Hunt, MA CAMF
Health Promotions Coordinator
Robert E. Bush Naval Hospital*

The American Academy of Ophthalmology states that eye injury is a significant health problem in the United States -- “second only to cataract as a cause of visual impairment. Each year more than 2.5 million eye injuries occur and 50,000 people permanently lose part or all of their vision.”

Ninety percent of all eye injuries can be prevented by using protective eyewear. The Centers for Disease Control and Prevention (CDC) has calculated that vision loss costs the U.S. \$51 Billion per year in direct medical costs, lost productivity, etc. This doesn’t include the personal costs such as pain and suffering.

Eye damage in the desert usually results from both the very bright sunlight found here and from blowing sand and debris. The biggest threat from sunlight in the desert comes from the UV rays present in sunlight. UV A and UV B rays can cause cataracts, retina damage, along with other damage, including skin cancer.

Cataracts occur when the lens of the eyes is damaged. The image passes through the lens to the retina - the inner, back wall of your eye. The retina transmits the image to your brain much like a camera catches what you see and transmits the image to film or sensors. If the retina is damaged, your brain doesn’t receive the image of what is in front of you and you are blind.

Pterygium and Pinguecula are growths that occur on the membranes or cornea of your eyes. While neither causes cancer, they must sometimes be surgically removed to prevent blindness. Photokeratitis is a sunburn on the cornea of the eye. The cornea is the clear membrane that covers the front of your eye and protects your eye.

Damage to your eyes from sunlight is cumulative over time. This means that damage builds up over time and the more damage you have as a young person, the greater your risk of eye damage and blindness as you age. Children especially should be protected from sun damage as their eyes are more delicate than an adult’s.

So how do I protect your eyes from sand and sun? It’s really very easy; wear a wide brimmed hat and correctly designed sunglasses. A wide brimmed hat will block approximately half of all UV light that reaches you. Properly made sun glasses will block much of the remaining UV light.

How do I know if my sunglasses are properly made? Properly made sunglasses should block 100 percent of both UV A and UV B light.

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Strong Families Always Plan for Change

By Brian P. Smith
TriWest Healthcare Alliance

Bumps, cuts and bruises are all part of any kid's life.

Dealing with deployments and multiple moves and school changes are all part of a military kid's life. As a parent, you strive for consistency. You want safety and happiness. But what do you do when your family gets bumped, cut and bruised along the way?

Adapting is a big part of being a military family. Change happens. These changes can be moves, deployments or an ill or injured parent; even a death in the family. You might need help starting a conversation with your kids about the new situation. Maybe you need something to point you in the right direction, or maybe you need someone to help guide you down the

path. Whether you are starting out on your own or feel like turning to behavioral health professionals for help, you're not alone. And remember, concentrating on your emotional health is just as important -- if not more -- than focusing on your physical health.

A good place to start is TriWest Healthcare Alliance's online behavioral health and parenting resource center (TriWest.com/FamilySupport). You can find information, self-assessments and professional resources on a wide variety of family and relationship topics that you can explore at your own pace, 24/7/365.

To get you started, here are three family-friendly tips from TriWest. Are you:

Modeling behavior?

Children watch their parents and siblings and "mirror" what they see; it's how they learn to

walk, talk and play with others. It's also how they learn to act in different situations. When the stress starts, how do mom, dad, brother and sister behave?

Dr. Blake Chaffee Ph.D., TriWest Healthcare Alliance vice president of integrated health care services, emphasizes that parents should be aware of how they deal with stress. "Deployment periods are a time when parents are modeling self-care and coping strategies for their children," he says. "This is the time to give your children examples of positive behaviors."

Dealing with it?

You'll be adjusting to the new roles, schedules, and relationships, too. Dealing with all those changes can help strengthen the bonds within the family.

"It's helpful to continually remind children that change can help families become stronger,

and to recognize and support your child's positive behaviors," Dr. Chaffee adds.

Getting it covered?

Behaviors that do not improve over time may need extra attention. You can start by talking to your child's primary care manager. As TRICARE beneficiaries, your children will be covered when working with a specialist. Your primary care man-

ager may be able to recommend an appropriate professional.

For most outpatient behavioral health care, your child will not need a referral for the first eight visits each year. Your family has many options under TRICARE to get the type of help you need. You can find more information about the TRICARE behavioral health benefit at TriWest.com/FamilySupport.

Deny Mosquitoes a Breeding Pool

By Lt. Shelley Griffith, MPH, RS
Robert E. Bush Naval Hospital

Summer is fast approaching and with it come the mosquitoes that accompany our outdoor activities.

There are ways you can prevent these bugs from flying away with your outdoor barbeque happiness. Simple things in the yard can have standing water. Mosquitoes need water to make more little mosquitoes.

Take a look around the outside of your home and notice what has water sitting in it. Think of ways to provide drainage to those items to get the water out. Properly dispose of old tires so they don't become a hatchery for new mosquitoes. Potted plants need to have proper drainage to maintain a healthy plant and to prevent standing water. These are just a couple of simple tips that may help to make your summer more enjoyable. Another way to plan outdoor activities is to understand that mosquitoes like to come out at dawn and dusk, just when it is warming up or cooling down here in the desert. Try to plan activities to end before the sun starts to go down. Protection from mosquitoes also can be accomplished by wearing long sleeves and jeans with covered shoes. This will prevent being bitten by a mosquito. Bug spray, zappers, and insecticide are also a choice, but it may be a smelly one.

If you would like to find more simple tips for enjoying summer activities just look at cdc.gov and epa.gov for more fun ways to stay healthy this summer.

You know where you want to go.

Sailor Career Toolbox

The tools you need to get there.

<http://www.npc.navy.mil/CareerInfo/CareerToolbox/>



To optimize access to care for patients the Robert E. Bush Naval Hospital is now listing open appointments each day on its Facebook Page.

The posting also informs patients on how to sign up for Relay Health, or to register with TRICARE Online...

Check it out on the Naval Hospital's Facebook!

Super Stars...



HM3 James Louck, Adult Medical Care Clinic, takes the oath at his recent reenlistment ceremony.



HM3 Raven Crook, OB/GYN Clinic, received a Gold Star in lieu of her second Navy and Marine Corps Achievement Medal.

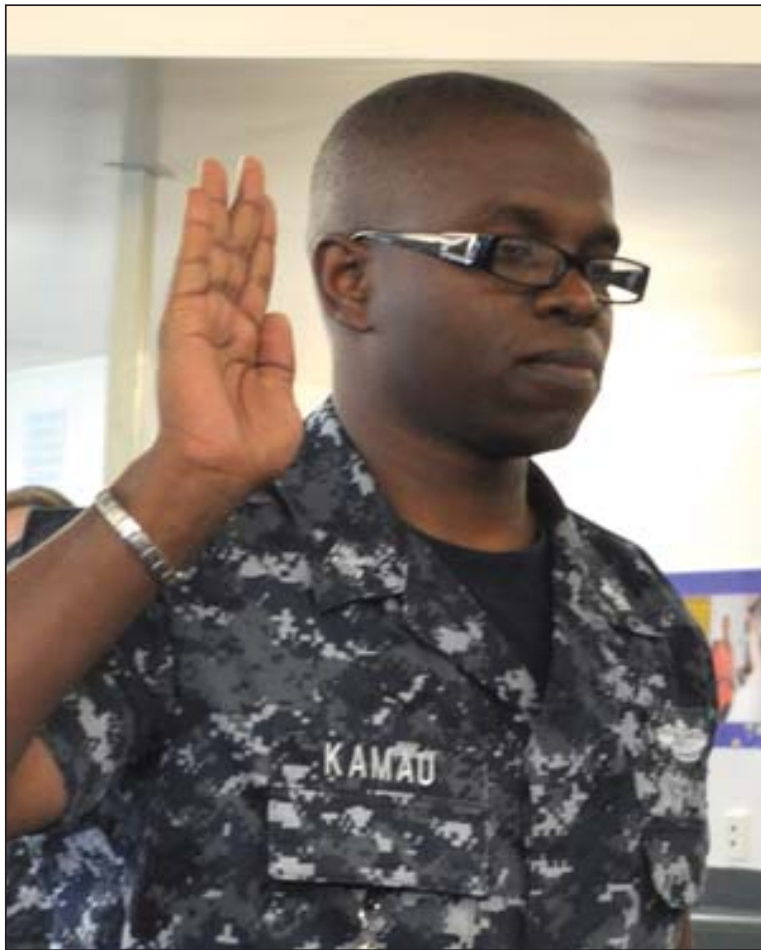


Andrew Bonner, Facilities Management Dept., was recognized by Captain Ann Bobeck, Commanding Officer, Naval Hospital Twentynine Palms at a recognition luncheon for his department.

Multi-Service Ward Celebrates Officer Promotions



Last month friends, family, and Multi-Service Ward staff celebrated as two of their officers were recognized for promotion. Kimberly Burnes (bottom) and Kelli Hromadka (top) were promoted from Lieutenant. Captain Maureen Pennington, past Director of Nursing Services, served as the promoting officer. Lieutenant Kelli Hromadka has been a member of the hospital for approximately 9 months and a Navy Nurse for 4 years. Lieutenant Kimberly Burnes has been on the staff member for approximately 1 year and a Navy Nurse for 4 years. Lt. Burnes deployed last month to join the USNS Mercy in support of Pacific Partnership 2012.



HM1 Peter Kamau, Respiratory Therapist, takes the oath at his recent reenlistment ceremony.



HM3 Zachary Zanzone, Public Health Dept., takes the oath at his recent reenlistment ceremony.



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and commissioned officers.
NAVY NURSE CORPS**

LCDR Brenda K. Reseter, Nurse Corps, USN



Kathy Sunny, Behavioral Health Dept., received the "Fish" award from her Department for Excellence in Customer Relations.

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Senior Nurse Executive...

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the military. “I have a brother who was in the Marine Corps and a sister who was in the Army. But they did one tour and got out.” The command’s newest member has a combined total of more than 30 years of service to her country.

“After I joined the Navy, I was assigned to YTM 543, a tugboat, in Norfolk, Va., in 1974,” said Mason. “This was a time when the Navy was changing the role of women in the military by expanding job opportunities and studying the feasibility of allowing women to be assigned to ships,” she added.

According to Mason, during that time, some men really didn’t like women being assigned to jobs that were traditionally done by them. “We had to work a little bit harder to get them to accept us as part of the crew. Despite the challenges, I really enjoyed the job, but I left the Navy to get an education as I had planned to do after high school. Being assigned to a tugboat didn’t allow time to take classes because we could be called out at any time when Navy ships were leaving port or returning,” she said. “With this duty we didn’t have a set work schedule.”

“That’s why I left the Navy and went to the Marine Corps because I was told that I would be allowed to attend school and they kept their word. I was also allowed to use annual leave to

do my clinical rotations. For that I am very appreciative. In return, I promised to always take care of Marines wherever I was assigned. This assignment is actually my first assignment on a Marine Corps base as a Navy Nurse. I am pretty happy about being assigned here,” said Mason.

Most of Mason’s Marine Corps tours were on the East Coast. She never got the chance to serve here in the desert. “While serving in the Marine Corps I worked in administration as a 0121/0193, I worked with personnel records, order writing, policy and budgeting,” she said.

Captain Mason’s goals for this job are to support the command’s mission of providing the best possible care to the patients. “I would like to help patients by bringing services in-house like establishing an infusion center so patients don’t have to drive all the way down to the lower desert for that service.”

“During my tour here I plan to conduct Senior Nurse Calls to hear the concerns of both patients and staff, because people are our greatest resource. The mission is important but without the people, the mission will not get done. I believe that we should always train. As the line community would say “train as you fight and fight as you train” so for me we should-

train the way we provide medical care to patients and provide that medical care the way we trained. When you find that you don’t need to be trained anymore then it’s time for you leave, Mason said.

“I have only been here a short time, so I’m sure other goals will come up,” she added.

“Both of my deployments to Afghanistan gave me a different perspective on training and medical care. I worked directly with the Afghanistan National Army medical staff, teaching them to run a hospital and how to take care of their patients. On my second tour I got to see how much of that training I did was still being used.”

Also, Captain Mason deployed aboard the hospital ship USNS Mercy during Desert Storm/Desert Shield for seven

months where she was assigned to a 80-bed Intensive care Unit as staff nurse taking care of our own military members who were freed Prisoners of War, “I got to do the job that I was trained to do,” she said.

Mason was also deployed aboard the hospital ship “The USNS Comfort” to the Baltic Sea for 60 days for a humanitarian mission in conjunction with participating in a naval exercise. “Everywhere I have been deployed in caring for people they have always been appreciative,” she said. The statement a patient made that sticks with me most is when I was on the Mercy in Bahrain, one of the young Sailors came to me and said, “I’m so glad that you are here because if I get shot I know that I will be taken care of because you guys are here.”

Later we had a patient suffering with a perforated ear drum and became life threatening because the infection spread to his brain. We got him in the nick of time to stabilize him and MEDEVAC him back to the States for definitive care. I thought back on that incident where we were able to save that person. This is why I always make sure to maintain my clinical skills so I am always ready when called upon to use them, and it is my goal to ensure my nursing staff maintain their clinical skills because you never know when you may be called to use them.”

Captain Mason enjoys bike riding and jazz music, she likes reading. While deployed she started taking guitar lessons and hopes to continue that here.

You have the Power?

Did you know that you have the power to influence how you are cared for at the Robert E. Bush Naval Hospital?

If you have recently received health care at the hospital you may receive a patient satisfaction survey form from the Navy’s Bureau of Medicine and Surgery regarding your visit. Your opinion about the service you received is very important to the staff here at the hospital and to our leadership in Washington, D.C. Please take a few minutes to complete and return the survey, noting our strengths and probably more importantly recommendations for areas we need to improve. This data is very important to the leaders of the hospital.

If you have any questions or concerns whenever you receive care here, you are always welcome to speak to the command’s Customer Relations Representative, Mr. Bob Greger. He can be reached at 760-830-2475. You can also leave a comment with the Marine Corps Air Ground Combat Center’s ICE system and your questions or concerns will be promptly answered.

Learning to Live with Lupus

By Kristin Shives
TRICARE Management Activity

May was Lupus awareness month. Lupus is a disease that can be mild or life-threatening depending on a person's present status. With proper medical care and knowledge, most people can manage a healthy life with lupus.

Lupus is an autoimmune disease that can affect various parts of the body, especially the skin, joints, blood and kidneys. A healthy body produces proteins called antibodies that protect against viruses, bacteria and foreign invaders known as antigens. Lupus causes a body to have trouble telling the difference between antigens and its own cells and tissue. In turn, the body makes antibodies and

attacks itself. These attacks can cause inflammation, pain and damage to organs.

Lupus is not easy to diagnose because it mimics other illnesses. According to the Lupus Foundation of America, diagnosing lupus is based on a combination of physical symptoms and laboratory results. It's important to know symptoms of lupus, and be aware of the risks associated with the disease.

Fatigue and non-specific pain are common with lupus and usually go unnoticed in the beginning stages. According to the U.S. Department of Health and Human Services, people suffering from lupus have symptoms that include; muscle and joint pain, anemia, chest pain, rashes, hair loss, light sensitivity, and mouth or nose ulcers.

Treatment of lupus depends on age, symptoms, general health

and lifestyle. The purpose of treatment is to reduce inflammation, suppress an overactive immune system, prevent flares, control joint pain and fatigue and minimize damage to organs. Regular evaluations are needed to check if the disease flares up. There are medications to treat lupus and TRICARE covers several of these medications. Use the formulary search tool http://pec.ha.osd.mil/formulary_search.php to find covered medications.

Beneficiaries on TRICARE Prime should speak with their primary care manager (PCM) if they notice any of these symptoms. A PCM referral is required to seek care from a rheumatologist. Rheumatologists specialize in diseases of joints and muscles. Beneficiaries on TRICARE Standard must use a TRICARE-authorized provider.

To optimize access to care for patients the Robert E. Bush Naval Hospital is now listing open appointments each day on its Facebook Page.

The posting also informs patients on how to sign up for Relay Health, or to register with TRICARE Online...

Check it out on the Naval Hospital's Facebook!

Premium Care...

Continued from page 1

appointments each work day on the hospital's Facebook page at <http://www.facebook.com/pages/Naval-Hospital-Twenty-nine-Palms/83701100741#>. Normally this posting will be listed by 7:15 a.m. each morning to allow the patients to see what is available. "If the caller misses the opportunity to book one of these appointments, they still will be able to talk to a team member who will do their best to help them," said Commander Lisa Morris, Director of Medical Services of the hospital. "We want our patients to be satisfied with their care, but we also want to deliver that care safely. With

that in mind we will always strive to say 'yes' to our patients when we can," she added. In addition, the hospital signed up for a secure computer based communications tool last year called Relay Health where patients can access their medical team from home...to email their provider, request an appointment, cancel an appointment, request a prescription renewal or find out the results of lab tests. To sign up visit: <https://app.relayhealth.com/Registration.aspx> and follow registration directions.

"We have found that the Medical Home Team method of

patient-centered care provides our customers with more access to primary care and it allows longer appointments so our providers are able to meet most if not all of our patients health care needs during one visit," said Morris.

The purpose of the Robert E. Bush Naval hospital is to care for the Marines, Sailors, and families of the Marine Corps Air Ground Combat Center and to keep its promise of care to the military retirees and families in the surrounding communities of the Morongo Basin. "The reason we are here is to care for our patients," said Morris.

Protecting Your Eyes...

Continued from page 2

Remember, it's the UV rays that do the most damage to your eyes. Properly made sunglasses should also block out as much overall light as possible. However, darker is not necessarily better. If the lenses of the sunglasses are dark, but don't block UV rays, you still are allowing the UV rays into your eyes and damaging your eyes.

They should also be polarized to eliminate glare. A lot of sunglasses advertised as polarizing

actually are not. There's a simple test you can perform before you buy them to make sure. Find a reflective surface outside in natural sunlight and hold the glasses so that you are viewing the surface through one of the lenses. Then slowly rotate the glasses to a 90-degree angle and see if the reflective glare diminishes and then increases as you change angle. If the sunglasses are polarized, you will see a significant change in the glare. If

they are not polarized, don't buy them.

Properly fitting sunglasses protects your eyes from blowing sand and dust. Sand and dust can cause corneal abrasions or scratches on the surface of your eye. These can be incredibly painful and affect your vision for weeks after.

You only have one set of eyes; please take good care of them by protecting them from sun and sand. Your eyes will thank you with a lifetime of clearer vision!

Super Stars...

Continued from page 5



Lieutenant Cornello Rustia, Emergency Medicine Dept. is piped ashore at his recent retirement ceremony.



Captain Maureen Pennington, Senior Nurse Executive, receives a Outstanding Volunteer Service Medal.



HM1 Jeremy Walton, Bio-Med Equipment, receives a Gold Star in lieu of his third Navy and Marine Corps Achievement Medal.



HM3 Michael Wall, Maternal Infant Nursing Dept., is honored by being authorized to wear the Naval Hospital Twentynine Palms Honor Guard Aiguillette.



Todd Phelps, Facilities, receives a Federal Length of Service Award.



Lt. Andrew Olson, Materials Management Dept. Head, receives a Navy and Marine Corps Commendation Medal.



HM2 Patrick Malone, Optometry Dept., was recognized at a department luncheon by Captain Ann Bobeck.

Healers of mind, body and spirit.
Ambassadors of hope.
Respected nursing professionals
and commissioned officers.
NAVY NURSE CORPS



ENS Jenna DiMaggio, Nurse Corps, USN